

Ceibraxs Limited

Ceibraxs Care Agency

Inspection report

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Ceibraxs Care Agency is a domiciliary care agency providing support to people in their own homes. At the time of our inspection there was 1 person receiving support. The agency had been supporting people who required end of life care. However, the agency was able to support people with a wide range of needs and ages should that be required.

People's experience of using this service and what we found

People received safe care and treatment. Staff supported people to mitigate risks to their safety. Staff adhered to infection control procedures and protected people from the risk of infection. Staff were knowledgeable in safeguarding adults' procedures.

There were sufficient staff to meet people's needs and safe recruitment practices were in place. Staff received training to ensure they had the knowledge and skills to undertake their duties. This included training on medicines management, basic life support, nutrition and hydration should people require this support.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People and their relatives were involved in their care and their wishes about how they wanted to be supported were included in clear, detailed care records. Staff supported people at the end of their lives in line with their faith, religion and culture.

There were processes in place to review the quality of care delivery and make improvements where necessary. People, their relatives and staff were encouraged to voice their views and opinions so these could be incorporated into service delivery.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 2 March 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



Ceibraxs Care Agency

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

In line with our new approach we gave short period notice of this inspection and explained what was involved under the new methodology.

Inspection activity started on 28 November 2022 and ended on 1 December 2022.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information held about the service since their registration. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager and two care workers. We reviewed care records, records relating to staffing and the management of the service. We also received feedback from a representative from the commissioning team who worked closely with the service.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- Staff had training on how to recognise and report abuse and they knew how to apply it.

Assessing risk, safety monitoring and management

- There were comprehensive risk assessments in place which clearly identified any risks to people's safety and how staff were to support people to minimise those risks.
- Assessments were made of any risks in the environment and equipment used to ensure these were safe for both people and staff.

Staffing and recruitment

- Safe recruitment practices were in place to ensure appropriate staff were employed. This included obtaining references, checking people's identity and eligibility to work in the UK and undertaking criminal record checks.
- There were sufficient staff to provide people with the level of support they required. This included providing 24 hour support when required.

Using medicines safely

• At the time of our inspection staff were not supporting people with their medicines. However, staff had received training in medicines management should people require this support.

Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

• An incident reporting process was in place and staff knew how to report and record any concerns



Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff received training to ensure they had the knowledge and skills to undertake their duties in line with best practice guidance. A staff member told us, "The training I had at the start of my job has helped me a lot. It has given me the attitude, skills, and knowledge to deliver safe and person-centred care to the people I look after."
- The provider had not been operational for very long, however, the registered manager told us there were plans in place to ensure staff received regular refresher training to ensure they stayed up to date with best practice.
- Staff had not received training on supporting people with a learning disability and/or autism as made mandatory for all health and care providers from July 2022. We bought this to the registered manager's attention who told us whilst they were not currently supporting people with a learning disability and/or autism they would ensure staff were enrolled on a suitable course.
- Staff received regular supervision and felt supported in their role.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

• Clear assessments were undertaken to identify people's needs including gathering information from commissioning authorities, people, relatives and other staff involved in people's care.

Supporting people to eat and drink enough to maintain a balanced diet

- At the time of our inspection people did not require support with their nutrition. However, we saw that staff were instructed in the person's care records to encourage the person to drink to ensure they stayed hydrated.
- Staff had received training in nutrition and hydration should people require this support.

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

• At the time of our inspection people did not require support with their healthcare needs. Their family supported them with this aspect of their care. However, staff had training on basic life support and would escalate any concerns with people's health should this be required. A staff member told us, "If I have concerns about the health of the [person] I am supporting. The first thing I will have to do is inform my manager about it. The manager will be in the best position to take the necessary action after I have documented it."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff obtained people's consent prior to providing support.
- Where people did not have the capacity to consent to certain aspects of their care, staff liaised with people who had the legal authority to make decisions on the person's behalf.



Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People received support from a consistent staff team which enabled them to build trusting, friendly relationships with their care workers. A representative from the commissioning authority told us, "We have received positive feedback from [people] regarding this care provider and their staff in regard to their knowledge and skills and general kindness and respect to [people]."
- Staff were respectful of people's individual differences and had received training in equality and diversity.

Supporting people to express their views and be involved in making decisions about their care

• People and their families were involved in decisions about their care. Staff liaised with people as part of the assessment process and throughout their care to ensure the support delivered was in line with their wishes.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity, and supported people to maintain as much independence as possible. A staff member told us, "I can support and maintain their privacy by letting them be as independent as much possible. That is, letting them do the things they can do and not trying to do everything for them. Also speak respectfully to them, knock before entering anywhere they are. And during personal care I make sure I maintain their privacy by covering them properly and above all show compassion and kindness."
- Another staff member said, "Maintaining confidentiality is a sign of respect. We give people the choice and independence to form their own opinion. Protecting privacy during personal care is paramount to dignity."



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised care that met their needs. Clear care records were maintained about people's support needs and how they wished to be supported.
- A staff member said, "To determine the type of support I can give to [the person] I will first have to refer to their care plan. Reading their care plan will inform me of the support I will provide to them." Another staff member told us, "We are made to read [people's] care plans before starting a new package. We are therefore aware exactly of the type of support everyone needs in a person-centred way."
- A representative from the commissioning authority told us, "We find [the registered manager] pleasant and approachable and goes that extra mile to help [people]; listening to their needs and respecting their preferences...He provides timely updates for our clients to enable us to respond appropriately and in a timely manner to any changes required."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• Information was available in a format which was understandable to the people receiving care. Staff understood how people communicated and adapted their approach to ensure people understood what was being communicated.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

• At the time of our inspection the person receiving support lived with a family member, staff were respectful of this relationship and supported the person to maintain relationships with other members of their family.

Improving care quality in response to complaints or concerns

• A complaints process was in place. Whilst no formal complaints had been made, we saw that action was taken in response to feedback to ensure any concerns raised were addressed promptly and people were satisfied with the service they received.

End of life care and support

 People were supported at the end of their life in line with their wishes, taking account of their faith, cultur and personal choices.



Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff, people and their relatives were involved in service delivery. They were asked for their views and opinions about service provision through informal discussions, meetings, spot checks and completion of satisfaction surveys. The findings from these were used to improve and develop practice when required.
- A staff member said, "I thoroughly enjoy working with Ceibraxs care agency. The atmosphere is great, and I look forward every day to going to work...I know I will be listened to without any fear...There is a culture of openness. Everyone can express their views during group supervision and meetings and know that no one will step on their human rights and be picked on for saying how they feel.
- Another staff member told us, "We are free to talk to [the registered manager], air our opinions and views during staff meeting and fear no repercussions of backlash or disrespect...Working at Ceibraxs is great. The [registered manager] in my short time I have been there have shown that they are not just bosses. I have also seen that they are good leaders. They go out of their way to make sure that their staff are well treated."
- Feedback the agency received from previous families in their satisfaction survey included, "To the Ceibraxs family thank you so very much for the care and respect that you gave mum...we will be eternally grateful", "We thank you for all your kindness and care during a difficult time" and "For the 15 days Ceibraxs looked after [the person] before he died they were helpful, compassionate and capable of caring well for him up to the end."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The service apologised to people, and those important to them, when things went wrong
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was aware of their duty to submit statutory notifications about key events that occurred at the service in line with the service's CQC registration.
- There were systems in place to review and improve the quality of service provision. This included regular spot checks and monitoring calls to ensure people received quality care that met their individual needs. If any improvements were identified as being required through these processes, timely action was taken to make those improvements.

Continuous learning and improving care; working in partnership with others

- There was a commitment to continuous development and growing the organisation. A staff member said, "There's nothing like working in an organisation that makes you feel valued, and when that is the case the staff will always want to deliver their best to grow the organisation. I feel honoured to be a member of their team."
- The registered manager attended regular forums with other social care managers to share ideas and learn best practice.